PCIP Third Party Administrator – Performance Report February 2014

Medical and Pharmacy Claims Processing	Contract Requirement	Level Met	Data Descriptions
"Clean" claims processed within 10 business days.	90%	99.8%	2,360 of 2,364 total claims
"Clean" claims processed within 30 calendar days.	100%	100%	2,364 of 2,364 total claims
Financial accuracy of claims paid.	99%	99.9%	\$1,005,553.40 of \$1,006,984.74 audited
Claims processed (paid and unpaid) without a payment error.	98%	98.1%	52 of 53 claims audited
Procedural accuracy rate for processing of claims.	97%	100%	53 of 53 claims audited
Disputed claims resolved within 30 calendar days	95%	100%	23 disputed claims
Disputed claims resolved within 60 calendar days	100%	N/A	0 disputed claims

Subscriber Health Care Service Appeals	Contract Requirement	Level Met	Data Descriptions
Resolution of non-urgent pre-service, post-service, and	98%	N/A	0 (0 appeals, 0 complaints)
pharmacy appeals and complaints within 30 calendar days.			
Resolution of urgent pre-service and pharmacy appeals within	80%	N/A	0 appeals
48 hours.			

Customer Service - Subscribers	Contract Requirement	Level Met	Data Descriptions
Calls answered within 30 seconds.	85%	88.3%	424 of 480 calls answered in 30 seconds; average of 18 seconds
Subscriber issues resolved within the same business day.	90%	95.3%	182 of 191 issue calls
Maximum call abandonment rate.	5%	2.2%	11 of 480 calls
Maximum line busy rate.	3%	0%	0 busy out of 504 calls
Voicemails answered within two business days.	90%	N/A	0 voicemails
Subscriber complaints resolved within 30 calendar days.	95%	N/A	0 complaints

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Provider Technical Support	Contract Requirement	Level Met	Data Descriptions
Calls answered within 30 seconds.	85%	89.8%	841 of 937 calls answered in 30 seconds; average of 17 seconds
Provider issues resolved within the same business day.	90%	95.2%	810 of 851 issue calls
Maximum call abandonment rate.	5%	0.5%	5 of 937 calls
Maximum line busy rate.	3%	0%	0 of 944 calls
Voicemails answered within two business days.	90%	N/A	0 voicemails
Provider appeals resolved within 30 calendar days.	95%	N/A	0 provider appeal

Independent External Review (IER)	Contract Requirement	Level Met	Data Descriptions
Expedited IER requests transmitted to administrative vendor within two business days.	100%	N/A	0 requests
Standard IER requests transmitted to administrative vendor within five business days.	100%	N/A	0 requests

Administrative Hearings	Contract Requirement	Level Met	Data Descriptions
Requests for subscriber case files transmitted to Managed	100%	N/A	0 requests
Risk Medical Insurance Board within five business days.			